

MEASURE J
"REIMAGINE LA"



2021 SPENDING

RECOMMENDATIONS PROCESS

Diversion, Behavioral Health & Health
Subcommittee Meeting #5

Interpretation on Your Computer

1. Select the interpretation icon on the bottom of your screen.

Seleccione el icono de interpretación en la parte inferior de la pantalla.



1. On the drop down menu, select the language you want to hear.

Aparecerá un menú. Seleccione el idioma que desea escuchar.



1. To only hear the interpreted language, click Mute Original Audio.

Para escuchar solo el idioma interpretado, haga clic en Silenciar audio original.

Interpretation on Your Mobile Device

1. In your meeting controls, tap the ellipses icon.

Para acceder a la interpretación desde su dispositivo móvil, en los controles de reunión, toque el icono elipses.



1. Tap **Language Interpretation**.

Seleccione la interpretación del idioma.

1. Select the language you want to hear.

Seleccione el idioma que desea escuchar



Interpretation in Spanish at this Meeting

❖ Please speak *more slowly* for Interpretation

❖ Hable *más despacio* para los que están interpretando



A vibrant landscape photograph featuring a wide river with white-capped rapids in the foreground. A brilliant rainbow arches across the sky, its base resting on the distant horizon between two steep, forested hills. The hills are covered in dense, lush green vegetation. The sky is a clear, deep blue with a few wispy clouds near the horizon. The overall scene conveys a sense of natural beauty and tranquility.

Breathe

The background of the slide is a photograph of a beach at sunset. Numerous palm trees are silhouetted against a sky that transitions from a deep purple at the top to a bright orange near the horizon where the sun is setting. In the foreground, the silhouettes of people are visible, some standing and others sitting, along with a few beach structures like a lifeguard stand.

Acknowledgement of Local Native Peoples

Tongva/Kizh/Gabrieleño, Tataviam & Chumash

Meeting #5 Goals

- **Vote on the Measure J
Funding
Recommendations**



An illustration on the left side of the slide shows a person with dark hair, wearing an orange sweater and teal pants, standing next to a large, light blue document. The person is holding a red pencil and pointing at the first item on the document, which is circled in red. The document has several horizontal lines representing text, with the first item numbered '1', the second '2', and the third '3'. The background features stylized green leaves and a teal circular shape.

Agenda

1. Introduction and Grounding
1. Action Item: Public Comment and Vote on Funding Recommendation Slate #2
1. Action Item: Public Comment and Vote on Funding Recommendation Slate #3
1. Action Item
2. Public Comment

Diversion, Behavioral Health, and Health Subcommittee Group Agreements

- 1) **Be Present** - Try to have cameras on, listen actively and turn off other devices and apps during the meeting
- 2) **Equity in Participation**
 - *Please mute while others are speaking*
 - *Raise your hand to be in the speaking stack (*9 on the phone)*
 - *Be ready to unmute (*6 to mute and unmute on the phone)*
 - *If you have spoken allow space for others to speak before you. Facilitators will call on others in the stack if you have spoken so we can hear everyone's comments and voice*
- 3) **Practice Grace and Openness** - We are all here with good intentions and want to improve people's lives, let's give each other a chance
- 4) **Take Care of Your Bodies** - Get up to stretch, use restroom, hydrate, etc.
- 5) **Use Human-First Language**
- 6) **Respect Everyone's Pronouns**
- 7) **Patience**
- 8) **Harm Reduction: We meet people where they are at.**
- 9) **Assume Positive Intentions**
- 10) **Remember why we are here**
- 11) **One agreement-Keep on task**

Zoom Instructions to Support Participation

RENAME

Name you want to be called, Gender Pronouns & Organization (if affiliated)

optional



USE THE CHAT

- To connect
- To respond
- To ask questions



RAISE YOUR HAND

You can “Raise your hand” by looking under the **“Reactions”** Icon

OR

Type **“STACK”** in the chat to get in the speaking order

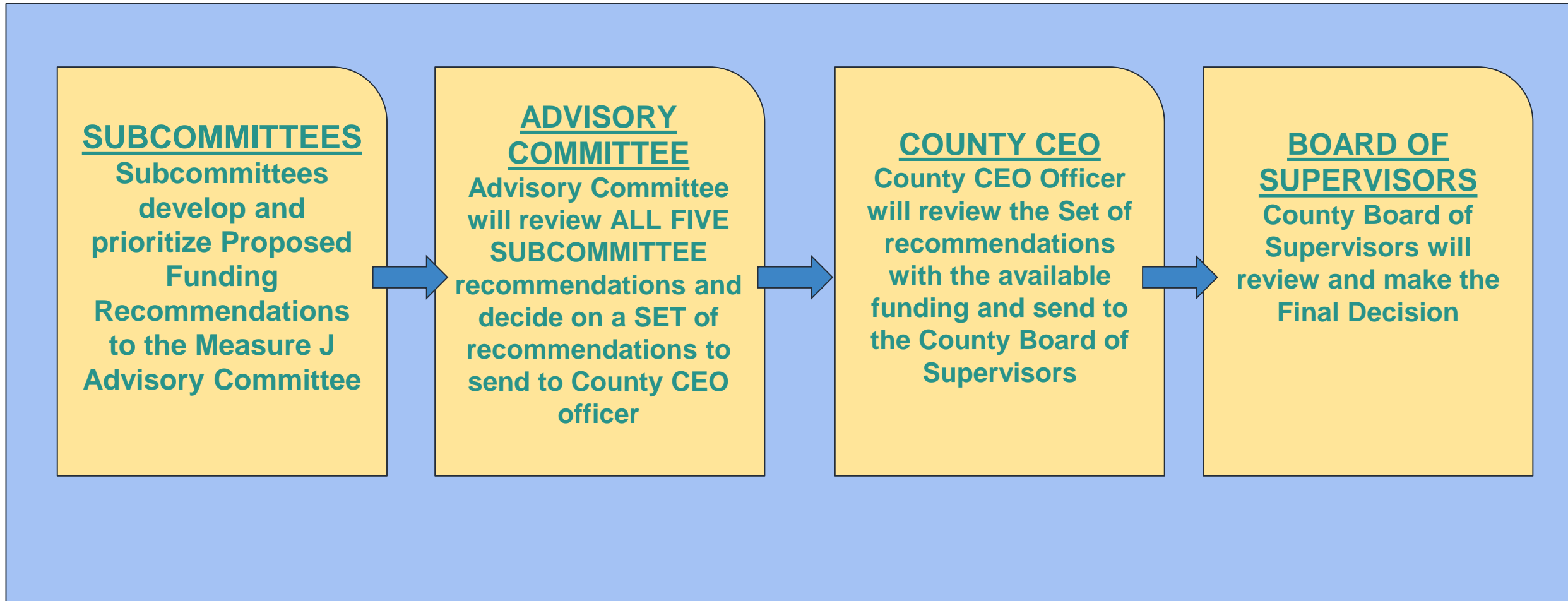


FOR THE PHONE

- *6 - Mute/Unmute
- *9 - Raise Hand



Overall Decision Making Process for Funding Recommendations



NEXT STEPS

The **Measure J “Reimagine LA” Advisory Committee** will review the Subcommittee’s funding recommendations and **make final decisions** on what is presented to the County’s Chief Executive Officer.

They will meet:

- ☐ Thursday March 18: 4:00pm - 6:00pm
- ☐ Thursday April 1: 4:00pm - 6:00pm
- ☐ Thursday April 15: 4:00pm - 6:00pm

[**https://ceo.lacounty.gov/ati-calendar/**](https://ceo.lacounty.gov/ati-calendar/)

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ati@lacounty.gov





Measure J Funding Recommendations Vote

UPDATED: March 8, 2021 with *community feedback and then again during the March 9 Subcommittee meeting*

Funding Recommendations Slates

(When we say “slate,” we refer to a set of funding and policy recommendations that the Subcommittee will refine and vote on as one package.)



This slate of funding recommendations was formulated based on the ideas shared by subcommittee members in meetings 1-4:

- **Meeting Jamboards**
- **Comments During the Meetings**
- **Chat During the Meetings**
- **County Proposals**



Approved!

SLATE #2: amended

Community-Inspired Funding Recommendations

Total: \$60 million

- **Funding Recommendation #1:** Expand access to community based harm reduction and trauma-informed services in health care, behavioral health, **harm reduction Substance use services**, and mental health in communities most disproportionately impacted by incarceration, poverty, covid-19, and other low social determinants of health. \$15 million
- **Funding Recommendation #2:** Expand delivery of health care, behavioral health, **harm reduction Substance use services**, and mental health services in partnership with community in locations such as but not limited to community based organizations, barber shops, libraries, and parks. **Creative art and music spaces, beauty shops, places of worship, and schools** \$15 million -
- **Funding Recommendation #3:** Increase access to housing first and housing that heals **permanent supportive housing with access to wraparound behavioral health services**, especially for: people ageing out of foster care, people coming out of incarceration from juvenile or adult jails or prisons, people who are parents, people with health, behavioral health, or mental health needs. \$15 million
- **Funding Recommendation #4:** Expand and create **Home visitation/promotoras model** to provide access to resources, jobs, and services to the community with local zip code hired community health workers. \$15 million

Guidelines for funding Community-Inspired Funding Recommendations

Organizations and programs receiving Measure J funds must:

- Be led by and primarily service the following priority populations that are most severely impacted by incarceration in LA County as identified by the JENI (Justice Equity Need Index) and the JESI (Justice Equity Supply Index):
 - Reentry Community
 - Black Indigenous People of Color (BIPOC),
Particularly:
 - Black Women
 - People with Disabilities
 - Young People
 - Immigrants
 - Two Spirit, Trans, Gender Non-binary, and Queer People
- Share the Measure J and ATI (Alternatives to Incarceration) values and employ formerly incarcerated people
- Be located in areas of highest need according to data such as the JENI and JESI indexes
- If CBO's want to provide medical reimbursable services they should not be obligated to contract with DMH.



Bio & Stretch Break

SLATE #: 3

Care First, MCJ Closure

Total: \$260 million

Approved!

- **Funding Recommendation #1:** Fund A Community-Based, Non-Law Enforcement, Pretrial Services Pilot Program that Will Help End Pretrial Incarceration.
- **Funding Recommendation #2:** Expand harm reduction programs and services to prevent overdose, justice involvement, and create diversion safety valves.
- **Funding Recommendation #3:** Support the closure of Men's Central Jail by allocating \$200 million in Year 1 to immediately expanding a mix of housing and services beds for at least 3,600 justice-involved people and the communities most disproportionately impacted by incarceration, poverty, covid-19, and other low social determinants of health.
- **Funding Recommendation #4:** Expand life affirming life responses to behavioral, mental, and co occurring health crises to prevent law enforcement responses and incarceration.

1. Fund A Community-Based, Non-Law Enforcement, Pretrial Services Pilot Program that Will Help End Pretrial Incarceration

Fund and expand community based pretrial services through a pretrial pilot, in the communities most severely impacted by incarceration in LA county as identified by the JENI (Justice Equity Need Index) and the JESI (Justice Equity Supply Index), that can provide services and resources, including culturally-rooted, trauma informed survivor support, to people in their communities pre-trial instead of law enforcement supervision, e-incarceration, and pretrial incarceration.

The primary functions of community based service providers would be to: Conducting a strengths and needs-based assessment at the jail of all individuals in custody to determine a plan of support to get the individual released pre-trial; Sending court date reminders to all individuals with pending court dates; providing peer navigation support; and Coordinating services in order to connect individuals with supportive resources.

\$10 million to fund Year 1 of the Community-Based Pretrial Services that Will Help End Pretrial Incarceration.

2. Diversion Triage and Safe Landing Center

Department of Health Services & Office of Diversion and Reentry

The Diversion and Safe Landing Center is a **proposed** project to accommodate persons who are acutely mentally or physically ill who are immediately discharged/released from jail on presumptive pre-trial diversion.

The site would act both as a **reception point/triage center and safe landing site.**

Ensures that vulnerable persons exiting LA County Jail in crisis are welcomed, oriented to necessary court follow-up, and **have their health and mental health needs appropriately assessed and triaged** to avoid unnecessary hospitalization or poor outcomes.

Site would **provide temporary accommodations** (bed, shower, meal, clothing, etc) to **ensure the person isn't being released from jail directly into homelessness**, and has the opportunity to be connected to eligible housing services and supports.

89.4%

of funding going to
Community-based
organizations

One-time budget:
\$5,000,000

Ongoing Budget:
23,300,000

2b. Harm Reduction Program Expansion

Department of Health Services & Office of Diversion and Reentry

DHS Harm Reduction Program Expansion (HRPE) will **provide DHS Housing for Health and ODR-contracted providers with trainings to expand their harm reduction knowledge to improve quality engagement with people who use drugs and people who engage in sex work.**

Additionally, HRPE will **maintain a clearinghouse of harm reduction supplies** to reduce the spread of HIV, HCV, promote and support wound care and overdose prevention. These supplies will be available to the HFH, ODR staff, contracted providers and partners to distribute to their outreach contacts/ clients/ housing site residents or others they serve.

This program will be done **in partnership with a community-based harm reduction organization** with a strong commitment to **peer staff** and supporting individuals with lived experience of substance use, incarceration, homelessness and/ or sex work.

100%

of funding going to
Community-based
organizations

One-time budget: \$2,705,126

Ongoing Budget: \$2,705,126

2c. Overdose Education Naloxone Distribution (OEND)

Department of Health Services & Office of Diversion and Reentry

Provide overdose education and Narcan to people who are released from LAC jails, DHS providers and individuals in contact with DHS services.

People leaving jails and prisons are 40-75 times more likely to die from an opioid overdose in the 2-4 weeks after release than the general population.

Since Black and Latinx people are disproportionately incarcerated, this **program addresses a racial equity gap** in getting a **life saving intervention** to people who need it most.

Expands education/narcan distribution to areas where there are few harm reduction services. A Naloxone Access Point (NAP) will be located in each SPA.

The target population:

Individuals who are released from LA County jails, individuals in or leaving SUD treatment, individuals experiencing homelessness or at risk of homelessness, the reentry population, people who use drugs, and family/friends/acquaintances connected with any of the above populations and/or who are likely to be present at the scene of an overdose, and staff who work with any of the above populations.

100%

of funding going to
Community-based
organizations

One-time budget: \$1,587,000
Ongoing Budget: 6,057,696

Who is Eligible:

Individuals who use drugs,
and family, friends &
acquaintances & staff who
are likely to be present at
the scene of an overdose.

2d. SUD Court Diversion & Jail Booking Diversion

Department of Health Services & Office of Diversion and Reentry

Individuals in station jails, courts or IRC with substance use disorder will be diverted into harm reduction case management services in lieu of booking and prosecution.

People of color with substance use needs are disproportionately represented among those who are incarcerated.

This program will reduce racial disparities by diverting individuals away from jail and into community based harm reduction services.

Aligns with **ATI recommendation #16** to reduce the adverse impact that severity of substance use charges have on people.

85%

of funding going to
Community-based
organizations

Two Programs

SUD Court Based Diversion

Ongoing Budget: \$2,092,590

SUD Jail Booking Diversion

Ongoing Budget: \$2,038,208

3. Support the closure of Men's Central Jail

Support the closure of Men's Central Jail by allocating \$200 million in Year 1 to immediately expand a mix of housing and services beds for at least 3,600 justice-involved people and the communities most disproportionately impacted by incarceration, poverty, covid-19, and other low social determinants of health.

ATI Policy Recommendations

- Recommendation #59: Expand a the AB 1810 Diversion efforts by the Office of Diversion and Reentry—PC 1001.36 and 1170(a)(1)(B)(iv) and 1370.01(a)(2)—to identify early on persons for diversion and develop pathways countywide to connect individuals to appropriate mental health programs to accomplish the goals of pre-conviction diversion and respond to all other present and future diversion opportunities, including pre- and post-conviction.
- Recommendation #20: Expand or refine affordable successful housing models designed for and tailored to justice-involved individuals with mental health and/or substance use disorder needs, specifically: (a) short-term treatment inclusive of acute inpatient, AB 109 and forensic inpatient (FIP) and IMD subacute beds; (b) interim housing inclusive of clubhouse living with supportive employment, recovery bridge housing and sober living; and (c) permanent subsidized housing inclusive of independent living and board and care facilities.

ATI Policy Recommendations

- **Recommendation #21 Modified:** Create and scale up innovative programs that comprehensively provide housing, wraparound services, and career-track employment for justice-impacted individuals. Ensure the availability of programs that meet the needs of and are tailored to people who identify as cisgender women, LGBTQ+, and/or TGI. **Require existing programs to create a pathway to become completely separate from law enforcement in year one of funding.**
- **Recommendation #22:** Develop partnerships with and between landlords, County departments, providers, and communities/neighborhoods that increase housing options and support residents in maintaining housing, including onsite management staff. Incentivize the creation and reservation of sufficient units for short- and long-term housing options for people who identify as LGBTQ+ and/or TGI.
- **Recommendation #10 Modified: Advocate to expand Medi-Cal and/or support services for system-involved people and their families. Note: during ATI implementation, create Measure J population specific Underserved Cultural Community unit (USCC) for LACDMH for MHSA services/funding.**
- **Recommendation #31:** Remove barriers to treatment, employment, and affordable housing, including recovery housing, based on stigmatization and discrimination due to record of past convictions through local and state legislative intervention or updating County policies.
- **Recommendation #88 Modified:** Fund comprehensive rehabilitative, evidence-based mental health and substance use care, as well as transitional housing with wraparound services, gender-affirming primary care, violence prevention, gang intervention, art therapy, family reunification, occupational therapy, and other programs in lieu of incarceration, i.e., interventions should take a holistic, whole person (or even family-centered) approach as their model in serving individuals while utilizing justice funds saved by decreased incarceration. This programming should be inclusive of and tailored to people who identify as women, TGI, and LGBTQ+ people including the most marginalized racial, ethnic and cultural groups in the geographic areas most impacted by incarceration. **Require existing programs to create a pathway to become completely separate from law enforcement in year one of funding.**

ATI Policy Recommendations

Recommendation #92 . Utilize County capacity-building programs, in conjunction with equity analysis, to expand the community-based system of care by:

- (a) finding and supporting smaller organizations in different SPAs to qualify for and access funds while providing seed funding (i.e. philanthropic partnerships, business loans, flexible government funding, pay for success models, and/or zone area investments, etc.); including those organizations with a history of serving system-involved people who identify as cisgender women, LGBTQ+ and/or TGI;
- (b) promoting existing providers as potential incubators; and
- (c) supporting training and TA to become service providers accessing Medi-Cal Fee Waiver, County and State funding, and organizational coaching as well as training in evidence-informed practice in serving TGI/LGBTQ+ people

4. Expand life affirming responses to behavioral, mental, and co occurring health crises to prevent law enforcement responses and incarceration.

- **Recommendation #35 Modified:** Significantly increase the number of DMH Psychiatric Mobile Response Teams (PMRTs) to reduce service wait time. **Funding Contingency: Create a plan to shift funding from County PMRT to CBO PMRT in Year 1 to be eligible for Measure J funding.**
- **Recommendation #43 Modified:** Train 911 operators and dispatch on mental health screening to direct calls involving behavioral health crises that do not require a law enforcement response towards Department of Mental Health's ACCESS line (e.g., integrate DMH line with 911, allow direct access from 911 operators to ACCESS) or an alternate **dedicated response line (988)**. Train 911 operators and dispatch to allow callers to request a responder that connects to the gender identity of the individual in crisis. **Develop plan in Year 1 to separate 911 dispatch system from law enforcement for mental health responders.**

If CBO's want to provide medical reimbursable services they should not be obligated to contract with DMH.

ROLL CALL VOTE

How to Vote:

1. Say Your Name.

2. Say Your Vote: “Yay/Yes” OR “Nay/No” OR “I Abstain”

SLATE # 3 VOTING:

Community-Inspired Funding Recommendations

Funding Recommendation #1:

Fund A Community-Based, Non-Law Enforcement, Pretrial Services Pilot Program that Will Help End Pretrial Incarceration.

Funding Recommendation

#2: Expand harm reduction programs and services to prevent overdose, justice involvement, and create diversion safety valves.

Funding Recommendation #3:

Support the closure of Men’s Central Jail by allocating \$200 million in Year 1 to immediately expanding a mix of housing and services beds for at least 3,600 justice-involved people and the communities most disproportionately impacted by incarceration, poverty, covid-19, and other low social determinants of health.

Funding Recommendation #4:

Expand life affirming life responses to behavioral, mental, and co occurring health crises to prevent law enforcement responses and incarceration.

PUBLIC COMMENT



Next Steps



Measure J Advisory Committee

Board Appointees

Veronica Lewis, Chair
SSG/HOPICS

George Andrews
NAACP, Antelope Valley Branch

Eunisses Hernandez
La Defensa, JLA Coalition

Dr. Robert Ross
California Endowment

April Verrett
SEIU, Local 2015

County Department Leads

Dr. Jon Sherin, Vice Chair
Department of Mental Health (DMH)

Judge Peter Espinoza (ret)
Office of Diversion & Reentry (ODR)

Dr. Barbara Ferrer
Department of Public Health (DPH)

Dr. Christina Ghaly
Department of Health Services (DHS)

Dr. Gary Tsai
Substance Abuse Prevention & Control (SAPC)

Lived Experience Members

Mandie Dixon
A New Way of Life Reentry Project

Ta (Duc) Huynh
API RISE

Roberto Luca
Mass Liberation

Hector Ramirez
Disability Rights California National Disability Rights Network

Bill Tarkanian
LA Center for Alcohol & Drug Abuse (LACADA)

Labor Representatives

Daniel Langford
Southwest Regional Council of Carpenters

Bob Schoonover
SEIU, Local 721

The first term will end on September 30, 2022,

NEXT STEPS

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Field	Description
Subcommittee Name	Subcommittee Name
Strategy Name	Name of Strategy
New or Existing Program	Indicate whether the strategy is and 1) Expansion of Existing Program, 2) Existing Program with Modifications or 3) New Program
ATI Foundational Recommendations this Strategy Addresses	ATI Recommendation number(s) is entered here
Related Intercept Number(s)	The respective ATI Intercept Model numbers are entered here if applicable
Description of Program Services and Activities	Detailed description of the intervention, services, imitative being recommended
Intended Program Outcomes	Details about the qualitative and quantitative intended program outcomes as a result of this strategy
Population to be Served	Details about who this strategy is designed to serve (recently returning citizens, soon to be returning people, people in the community already, people awaiting trial, small nonprofits, black owned businesses, etc.0
Projected Cost	Cost associated with direct services and administration of this strategy (i.e. per night costs, annual or monthly cost for services, grant administration expenses, etc.0
Leverage Opportunities	Details about other (non-Measure J) funding that can be leveraged for this strategy
Feasible to Launch in Year 1	Indicate whether or not the strategy is feasible to be implemented during Fiscal Year 2021-22
Suggested Implementation Timeline	Details about steps needed to execute and implement this strategy (in months, days, etc.)
Suggested Funding Administrator	Recommendations about how this strategy is funded (i.e. through County Departments, other public entities, third party private entity, other)
Does this Strategy Pass the Racial Equity Assessment	Indicating whether or not this strategy satisfied the 13-point Racial and Gender Equity assessment
Voting Record for this Strategy	How many people in the subcommittee voted for this strategy, voted against this strategy, an for abstained

Next Steps:

Co-Chairs are charged with taking the approved funding recommendations and putting them into a spreadsheet like the one of the left.

This is how the Subcommittee's Funding Recommendations will be submitted to the Advisory Committee.

Meeting Materials will be posted on the Measure J Website

<https://ceo.lacounty.gov/measure-j-2021-spending/>

Economic Opportunities and Sustainability		Diversion, Behavioral Health, and Health		Education Access and Youth Development		Housing
Reentry						
Tuesday, Feb 9	4:00 – 6:30 PM	Agenda	Minutes	Presentation Meeting Record	ZOOM	
Tuesday, Feb 16	4:00 – 6:30 PM	Agenda		Advancement Project JENI briefing ICHS Overview Presentation SAPC – DPH-SAPC SUD Data	ZOOM	
Tuesday, Feb 23	4:00 – 6:30 PM	Agenda			ZOOM	
Tuesday, Mar 2	4:00 – 6:30 PM	Agenda			ZOOM	
Tuesday, Mar 9	4:00 – 6:30 PM	Agenda			ZOOM	